PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

31759-199754

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS			18				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/S/ minus 20=		* 0			X\$ 9=		OR	X\$18=	.0	
INDEPENDENT CLAIMS			3 minus 3 =		* 0			X43=		OR	X86=	o	
ML	ILTIPLE DEPEN	IDENT CLAIM PR	RESENT				Ī	+145=		OR	+290=	رم	
* If the difference in column 1 is less than zero, enter "0"						olumn 2	L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY		
_	1	(Column 1) CLAIMS		(Colui		(Columnia)	Г	1	ADDI-	1		ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	##		=		XS 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	~	NDDII. FEE I			7.0011.122		
_	1	CLAIMS	1		HEST	(Column o)	l r		ADDI-	l		ADDI-	
AMENDMENT B	Ļ	REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=] [X43=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		J ∤	+145=		OR	+290=		
TOTAL											1		
							,	ADDIT. FEE	L	JOH	TOTAL ADDIT. FEE	<u> </u>	
		(Column 1)			ımn 2)	(Column 3)	.			٠,			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI PAIC		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	↓ I	X43=		OR	X86=		
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
						aluma 2	Į	+145=		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
**	If the "Highest Nu	imber Previously P	aid For" IN Th	HS SPACE	is less that	an 20, enter "20)." ,	ADDIT. FEE		OR	TOTA ADDIT. FE		